

RECEIVED
CENTRAL FAX CENTER

OCT 26 2004

Please type a plus sign (+) inside this box →



PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	09/462,962	
		Filing Date	June 25, 2001	
		First Named Inventor	JACKSON, STEPHEN PHILIP	
		Group Art Unit	1653	
		Examiner Name	Hope A. Robinson	
Total Number of Pages in This Submission		6	Attorney Docket Number	MEWE-010
ENCLOSURES (check all that apply)				
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input checked="" type="checkbox"/> To Office Communication <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)		
		<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1. Copy of Communication		
Remarks				
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT				
Firm or Individual Name	PAMELA J. SHERWOOD, Reg. No. 36,677			
Signature				
Date	October 26, 2004			

CERTIFICATE OF FACSIMILE TRANSMISSION			
I hereby certify that this correspondence is being facsimile filed under 37 C.F.R. §§ 1.6(d) and 1.8(a)(1)(b) addressed to: 703-872-9306 on this date: October 26, 2004.			
Typed or printed name	Susan M. Alcesi		
Signature		Date	October 26, 2004

Burden Hour Statement: This form is estimated to take .2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450 Alexandria VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: P.O. Box 1450 Alexandria VA 22313-1450.

RECEIVED
CENTRAL FAX CENTER

OCT 26 2004

FAX:(703)872-9306 DATE: October 26, 2004

Response to Office Communication Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Attorney Docket No.	MEWE-010
	Confirmation No.	5713
	First Named Inventor	JACKSON, STEPHEN PHILIP
	Application Number	09/462,962
	Filing Date	June 25, 2001
	Group Art Unit	1653
	Examiner Name	ROBINSON, HOPE A.
	Title:	"INTERACTIONS OF ATM, ATR OR DNA-PK WITH P53"

Sir:

Applicants herein respond to the Examiner's communication of October 7, 2004, in accordance with the Examiner's comments during a telephone interview on October 26, 2004. At the request of the Examiner, Applicants herein amend the claims to replace a comma that was inadvertently omitted from Applicants amendments filed August 4, 2004

Please amend the above-identified application as follows: